

PART B - FEE(S) TRANSMITTAL

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63162 7590 08/14/2009

VIA ELECTRONIC FILING
 NOVEMBER 12, 2009

TRASK BRITT, P.C./ MICRON TECHNOLOGY
 P.O. BOX 2550
 SALT LAKE CITY, UT 84110

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/576,727	05/23/2000	Chad A. Cobby	3639.IUS (97-1381.1)	3108

TITLE OF INVENTION: SYSTEM FOR LOCATING CONDUCTIVE SPHERE UTILIZING SCREEN AND HOPPER OF SOLDER BALLS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$0	\$1400	\$1510	11/16/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
TRINH, MINH N	3729	029-245000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.305) <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input checked="" type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. <u>faxed separately</u>	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 <u>TraskBritt</u> 2 _____ 3 _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Micron Technology, Inc.

Boise, Idaho

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
☐ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies _____

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- ☐ A check is enclosed. ***\$110.00
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☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 20-1469 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

James R. Duzan

Date November 12, 2009

Typed or printed name James R. Duzan

Registration No. 28,393

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